

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000079844

FILED
Jan 20, 2009
Secretary of State

Entity Name: NATHAN W. PATTERSON, M.D., P.L.

Current Principal Place of Business:

426 W. LLOYD STREET
PENSACOLA, FL 32501

New Principal Place of Business:

1040 GULF BREEZE PARKWAY
207
PENSACOLA, FL 32561

Current Mailing Address:

426 W. LLOYD STREET
PENSACOLA, FL 32501

New Mailing Address:

FEI Number: 20-5860677 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATTERSON, NATHAN W M.D.
426 W. LLOYD STREET
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PATTERSON, NATHAN MD
Address: 426 W LLOYD ST
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NATHAN PATTERSON, M. D. MGRM 01/20/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date